

PALMER CENTER

3023 SOUTH 84TH STREET

WEST ALLIS 53227

Phone: (414) 607-4100

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 10

Total Licensed Bed Capacity (12/31/03): 10

Number of Residents on 12/31/03: 8

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

No

No

Yes

8

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		50.0
Supp. Home Care-Personal Care	No					1 - 4 Years		50.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		0.0
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	50.0			-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	37.5			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	12.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	0.0	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	0.0		-----	RNs		57.3
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		21.6
Other Services	No	Respiratory	100.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	87.5	Aides, & Orderlies		
Mentally Ill	No		-----	Female	12.5			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

## Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	7	100.0	400	0	0.0	0	1	100.0	901	0	0.0	0	0	0.0	8	100.0
Total	0	0.0		7	100.0		0	0.0		1	100.0		0	0.0		0	0.0	8	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	0.0	100.0	8
Other Nursing Homes	0.0	Dressing	0.0	0.0	100.0	8
Acute Care Hospitals	100.0	Transferring	0.0	37.5	62.5	8
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	0.0	12.5	87.5	8
Rehabilitation Hospitals	0.0	Eating	25.0	12.5	62.5	8
Other Locations	0.0	*****				
Total Number of Admissions	24	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	87.5		Receiving Respiratory Care	100.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	12.5		Receiving Tracheostomy Care	100.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	100.0		Receiving Suctioning	100.0
Other Nursing Homes	0.0				Receiving Ostomy Care	0.0
Acute Care Hospitals	63.6	Mobility			Receiving Tube Feeding	75.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	37.5
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care			Other Resident Characteristics	
Deaths	36.4	With Pressure Sores	12.5		Have Advance Directives	87.5
Total Number of Discharges (Including Deaths)	22	With Rashes	0.0		Medications	
					Receiving Psychoactive Drugs	87.5

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: Under 50 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	55.1	87.9	0.63	68.3	0.81	86.6	0.64	87.4	0.63
Current Residents from In-County	62.5	87.5	0.71	64.3	0.97	84.5	0.74	76.7	0.81
Admissions from In-County, Still Residing	12.5	22.9	0.54	13.4	0.93	20.3	0.62	19.6	0.64
Admissions/Average Daily Census	300.0	144.5	2.08	237.2	1.26	157.3	1.91	141.3	2.12
Discharges/Average Daily Census	275.0	147.5	1.86	246.9	1.11	159.9	1.72	142.5	1.93
Discharges To Private Residence/Average Daily Census	0.0	49.7	0.00	86.7	0.00	60.3	0.00	61.6	0.00
Residents Receiving Skilled Care	0.0	93.9	0.00	86.1	0.00	93.5	0.00	88.1	0.00
Residents Aged 65 and Older	100	97.1	1.03	87.0	1.15	90.8	1.10	87.8	1.14
Title 19 (Medicaid) Funded Residents	87.5	50.3	1.74	61.7	1.42	58.2	1.50	65.9	1.33
Private Pay Funded Residents	12.5	34.6	0.36	23.5	0.53	23.4	0.54	21.0	0.60
Developmentally Disabled Residents	0.0	0.6	0.00	0.0	.	0.8	0.00	6.5	0.00
Mentally Ill Residents	0.0	35.5	0.00	44.3	0.00	33.5	0.00	33.6	0.00
General Medical Service Residents	0.0	23.0	0.00	27.0	0.00	21.4	0.00	20.6	0.00
Impaired ADL (Mean)	92.5	51.9	1.78	56.9	1.63	51.8	1.79	49.4	1.87
Psychological Problems	87.5	62.2	1.41	50.4	1.73	60.6	1.44	57.4	1.53
Nursing Care Required (Mean)	53.1	7.2	7.35	8.9	5.96	7.3	7.32	7.3	7.25